

Outpatient Therapy Services

Comparison of Kansas Health Insurance Information System (KHIIS) Data Related to the Provision of Outpatient Rehabilitative Therapy Services

Table 1 - Summary of KHIIS Rehabilitative Therapy Data for SFY 2005-2008

SFY	No. of Unique Claims Identified	No. of Unique Billing Providers Identified	No of Unique Consumers Identified	Net Paid Amount	Change from Previous Year	Net Paid Per Consumer
2005	468,352	8,840	82,655	\$18,332,828	N/A	\$221
2006	494,593	8,569	81,127	\$19,891,004	8.50%	\$245
2007	496,334	7,853	79,629	\$21,173,604	6.45%	\$265
2008	508,609	6,693	77,780	\$20,221,584	-4.50%	\$259

It is important to note that the unique claim count, the unique consumer count and the unique billing provider counts are not certain. This is because the KHIIS data lack unique person identifiers so other methods for matching (i.e., membership ID, patient ID, patient DOB, patient gender, etc.) are used instead. Additionally, the insurance companies have in the past, changed some of these values with each quarterly data submission. In 2007, KHPA asked that the insurance companies discontinue this practice but verification that it has been totally eliminated is difficult; there is no perfect base-line for comparison.

**Table 2 - KHIIS Rehabilitative Therapy Expenditures for SFY 2005-2008,
Place of Service: Office**

SFY	No. of Unique Claims Identified	No. of Unique Billing Providers Identified	No of Unique Consumers Identified	Net Paid Amount	Change from Previous Year	Net Paid Per Consumer
2005	430,623	7,987	72,863	\$15,142,713		\$207
2006	463,149	4,691	72,927	\$16,870,687	11.41%	\$231
2007	471,560	7,113	73,544	\$18,546,017	9.93%	\$252
2008	496,922	6,240	74,571	\$18,529,361	-0.09%	\$248

Note: Number of Paid Claims, Number of Billing Providers, and Number of Unique Consumers may be duplicated in the POS tables as a claim may have more than one place of service in the detail line data which is the source of the place of service.

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**Table 3 - Summary of KHIIS Rehabilitative Therapy Expenditures for SFY 2005-2008,
Place of Service: Outpatient Hospital**

SFY	No. of Unique Claims Identified	No. of Unique Billing Providers Identified	No of Unique Consumers Identified	Net Paid Amount	Change from Previous Year	Net Paid Per Consumer
2005	25,578	874	8,042	\$2,155,446	N/A	268
2006	21,684	797	6,946	\$2,309,474	7.15%	332
2007	15,992	766	8,392	\$1,877,445	-18.71%	348
2008	6,267	316	3,009	\$1,409,567	-24.92%	468

**Table 4 - Summary of KHIIS Rehabilitative Therapy Expenditures for SFY 2005-2008,
Place of Service: Home**

SFY	No. of Unique Claims Identified	No. of Unique Billing Providers Identified	No of Unique Consumers Identified	Net Paid Amount	Change from Previous Year	Net Paid Per Consumer
2005	1,828	152	504	\$312,229	N/A	\$542
2006	2,114	208	502	\$264,769	-15.20%	\$444
2007	2,914	234	664	\$340,210	28.49%	\$439
2008	1,742	211	456	\$226,534	-33.41%	\$292

**Table 5 - Summary of KHIIS Rehabilitative Therapy Expenditures for SFY 2005-2008,
Place of Service: Comprehensive Outpatient Rehabilitation Facility**

SFY	No. of Unique Claims Identified	No. of Unique Billing Providers Identified	No of Unique Consumers Identified	Net Paid Amount	Change from Previous Year	Net Paid Per Consumer
2005	421	47	126	\$140,665	N/A	\$1,116
2006	680	66	204	\$92,558	-33.97%	\$455
2007	176	17	45	\$36,685	-60.50%	\$815
2008	14	2	3	\$3,504	-90.45%	\$1,168

**Table 6 - Summary of KHIIS Rehabilitative Therapy Expenditures for SFY 2005-2008,
Place of Service: Other**

SFY	No. of Unique Claims Identified	No. of Unique Billing Providers Identified	No of Unique Consumers Identified	Net Paid Amount	Change from Previous Year	Net Paid Per Consumer
2005	10,991	1,051	3,527	\$620,579	N/A	\$175
2006	7,227	850	2,074	\$394,862	-36.37%	\$190
2007	5,973	767	2,002	\$421,309	6.7%	\$210
2008	4,323	544	1,189	\$145,879	-65.37%	\$122

Comparison with Medicaid:

A comparison of most frequently billed diagnosis codes for which rehabilitative therapy services was provided revealed similarities in fiscal year 2008. Review of the top 10 diagnosis codes revealed four matching diagnosis codes. The majority of the diagnosis codes were in the ICD-9 range of 710-739, diseases of the musculoskeletal system and connective tissue. The most frequently billed diagnosis code extracted from the KHIIS database was lumbago or low back pain. Lumbago was the third most frequently billed diagnosis code for Kansas Medicaid. Other physical therapy was the most frequently billed Medicaid diagnosis code. This code did not appear in the top 10 KHIIS diagnosis codes. Cervicalgia or neck pain ranked second for KHIIS and number nine for Medicaid. Other matching diagnoses in the top 10 most frequently billed diagnosis codes included pain in the joint, lower leg region and pain in the joint, shoulder region. In conclusion, an across the board comparison cannot be made between Medicaid coverage of rehabilitative therapy to coverage by other insurers. However, there is a similarity in the trends regarding provider counts, claim counts, consumer counts and the expenditures paid per consumer. Review of diagnoses also revealed similarities. It appears that Medicaid coverage of outpatient therapy services is more generous than coverage in the private sector.

APPENDIX: REHABILITATIVE THERAPY PROCEDURE CODES

92506	Evaluation of speech, language, voice, communication, and/or auditory processing
92507	Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual
92508	Treatment of speech, language, voice, communication, and/or auditory processing disorder (includes aural rehabilitation);group, two or more individuals, one unit = one visit
92610	Evaluation of oral and pharyngeal swallowing
95831	Muscle testing, manual (separate procedure) with report; extremity (excluding hand) or trunk
95851	Range of motion measurements and report (separate procedure); each extremity (excluding hand) or each trunk section (spine)
96105	Assessment of aphasia (includes assessment of expressive and receptive speech and language function, language comprehension, speech production ability, reading, spelling,

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	writing, e.g., by Boston diagnostic aphasia examination) with interpretation and report per hour
97001	Physical therapy evaluation, one unit= one visit
97002	Physical therapy re-evaluation
97003	Occupational therapy evaluation
97004	Occupational therapy re-evaluation
97010	Application of a modality to one or more areas; hot or cold packs
97012	Traction, mechanical
97014	Electrical stimulation (unattended)
97016	Vasopneumatic devices
97018	Paraffin bath
97022	whirlpool
97024	Diathermy, (e.g. microwave)
97026	Infrared
97028	Ultraviolet
97032	Application of a modality to one or more areas; electrical stimulation (manual), each 15 minutes
97033	Iontophoresis, each 15 minutes
97035	Contrast baths, each 15 minutes
97036	Hubbard tank, each 15 minutes
97110	Therapeutic procedure, one or more areas, each 15 minutes; therapeutic exercises to develop strength and endurance, range of motion and flexibility
97112	Neuromuscular reeducation of movement, balance, coordination, kinesthetic sense, posture, and/or proprioception for sitting and/or standing activities
97113	Aquatic therapy with therapeutic exercises
97116	Gait training (includes stair climbing)
97124	Massage, including effleurage, petrissage and/or tapotement (stroking, compression, percussion)
97140	Manual therapy techniques (e.g. mobilization/manipulation, manual lymphatic drainage, manual traction), one or more regions, each 15 minutes
97150	Therapeutic procedure(s), group (2 or more individuals)
97530	Therapeutic activities, direct (one-on-one), patient contact by the provider (use of dynamic activities to improve functional performance), each 15 minutes
97532	Development of cognitive skills to improve attention, memory, problem solving (includes compensatory training), direct (one-on-one) patient contact by the provider, each 15 minutes
97533	Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact by the provider, each 15 minutes
97535	Self-care/home management training (e.g. activities of daily living (ADL) and compensatory training, meal preparation, safety procedures, and instructions in use of assistive technology devices/adaptive equipment) direct one-on-one contact by the provider, each 15 minutes
97597	Removal of devitalized tissue from wound(s), selective debridement, without anesthesia (e.g. high pressure water jet with/without suction, sharp selective debridement with scissors, scalpel, and forceps), with or without topical application(s), wound assessment, and instruction(s) for ongoing care, may include use of a whirlpool, per sessions; total wound(s) surface area less than or equal to 20 square centimeters

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97750	Physical performance test or measurement (e.g. musculoskeletal, functional capacity), with written report, each 15 minutes
G0151	Services of physical therapist in home health setting, each 15 minutes
G0152	Services of occupational therapist in home health setting, each 15 minutes
G0153	Services of speech and language pathologist in home health setting, each 15 minutes
S9128	Speech therapy , in home per diem
S9129	Occupational therapy, in home, per diem
S9131	Physical therapy; in home, per diem